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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 30-day comment request

The Hispanic Community Health Study/ Study of Latinos (HCHS/SOL)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the Federal Register on March 25, 2014 (Vol. 79, No. 57, pages 16345-16347). 3 comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Heart, Lung and Blood Institute (NHLBI), National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

DIRECT COMMENTS TO OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, OIRA_submission@omb.eop.gov or by fax to 202-395-6974, Attention: NIH Desk Officer.

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COMMENT DUE DATE: Comments regarding this information collection are best assured of having their full effect if received within 30-days of the date of this publication.

FOR FURTHER INFORMATION: To obtain a copy of the data collection plans and instruments or request more information on the proposed project contact either: Dr. Larissa Aviles-Santa, 6701 Rockledge, Epidemiology Branch, Program in Prevention and Population Sciences, Division of Cardiovascular Sciences, National Heart, Lung, and Blood Institute, National Institutes of Health, 6701 Rockledge Dr, MSC 7936, Bethesda, MD 20892-7936, or call non-toll-free number 301-435-0450, or E-mail your request, including your address to avilessantal@nhlbi.nih.gov . Formal requests for additional plans and instruments must be requested in writing.

PROPOSED COLLECTION: The Hispanic Community Health Study/ Study of Latinos (HCHS/SOL), Revision, National Heart, Lung and Blood Institute (NHLBI), National Institutes of Health (NIH).

Need and Use of Information Collection: The purpose and use of the information collection for this project is to study the prevalence of cardiovascular and pulmonary disease and other chronic diseases, and their risk and protective factors, understand their relationship to all-cause, cardiovascular and pulmonary morbidity and mortality, and understand the role of sociocultural factors (including acculturation) on the prevalence or onset of disease among over 16,400 Hispanics/Latinos of diverse origins, aged 18-74

years at enrollment, living in four U.S. communities: San Diego, California; Chicago, Illinois; Miami, Florida, and the Bronx, New York. In order to achieve these objectives, the HCHS/SOL had two integrated components:

- Examination of the cohort following a standardized protocol, which
 consisted of interviews and clinical measurements to assess physiological and
 biochemical measurements including DNA/RNA extraction for ancillary genetic research
 studies.
- 2. Follow-up of the cohort, which consists of an annual telephone interview to assess vital status, changes in health status and medication intake, and new cardiovascular and pulmonary events (including fatal and non-fatal myocardial infarction and heart failure; fatal and non-fatal stroke; and exacerbation of asthma and chronic obstructive pulmonary disease).

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 30,940.

Estimated Annualized Burden Hours

A.12.1 ESTIMATES OF HOUR BURDEN (APPENDICES 11, 14 AND 15)								
Type of Respondents	Survey Instrument	Number of Respondents	Number of Responses Per Respondent	Average Time per Response (in hours)	Total Burden Hours			
Participants Visit 2 Examination (Appendices 11 and 14)	Pre-visit scheduling & safety screening	13878	1	2/60	463			
	Reception, informed consent (Appendix 11), medical releases	13878	1	20/60	4626			
	Ppt. disability screening	13878	1	4/60	925			
	Ppt. safety update and routing	13878	1	2/60	463			
	Change clothes, urine specimen	13878	1	10/60	2313			
	Updated personal information	13878	1	5/60	1157			
	Anthropometry	13878	1	7/60	1619			
	Determination of fasting & blood draw	13878	1	11/60	2544			
	Determination of blood glucose, OGTT	13878	1	6/60	1388			
	Seated BP	13878		9/60	2082			

	Echocardiography	8000		30/60	4000
	2-hour blood draw, snack	13878		12/60	2776
	Personal Medical History	13878	1	10/60	2313
	Reproductive Medical History	9000	1	9/60	1350
	Pregnancy Complications History	9000	1	6/60	900
	Socio-economic Status – Occupation	13878	1	3/60	694
	Health Care Access and Utilization	13878	1	15/60	3470
	Chronic Stress	13878	1	4/60	925
	Family Cohesion	13878	1	5/60	1157
	Social Support	13878	1	3/60	694
	Acculturation	13878	1	3/60	694
	Well Being	13878	1	4/60	463
	Abbreviated Medication Use	13878	1	4/60	925
	Tobacco Use	13878	1	7/60	1619
	Alcohol Use	13878	1	3/60	694
	Participant Feedback	13878	1	12/60	2776
	Total			206/60	43030
Participants AFU Phone Interview (Appendix 15)	AFU Year 3	3146	1	15/60	787
	AFU Year 4	9033	1	15/60	2258
	AFU Year 5	14259	1	15/60	3565
	AFU Year 6	16222	1	15/60	4055
	AFU Year 7	16222	1	15/60	4055
	AFU Year 8	16222	1	15/60	4055
	AFU Year 9	16222	1	15/60	4055
	AFU Year 10	16222	1	15/60	4055
	AFU Year 11	16222	1	15/60	4055
	Total			120/60	30940

Dated: June 5, 2014. Dated: June 5, 2014.

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DCVS, NHLBI, NIH. National Institutes of Health.

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